STATE OF VERMONT

HUMAN SERVICES BOARD

In re)	Fair	Hearing	No.	20,310
)				
Appeal of)				

INTRODUCTION

The petitioner appeals the decisions by the Department for Children and Families, Economic Services terminating her older son's eligibility for Medicaid under the Dr. Dynasaur program and finding him financially ineligible for regular Medicaid and Vermont Health Access Plan (VHAP). The issue is whether the petitioner's income must be counted in determining her older son's eligibility for these programs.

FINDINGS OF FACT

- 1. The petitioner lives with her two children. Her older son is a high school student who turned eighteen in May 2006. Prior to June 1, 2006 the petitioner's older son was eligible for Dr. Dynasaur coverage based on his age (under 18) and family income (under 300 percent of federal poverty guidelines).
- 2. Based on information provided by the petitioner when her case was reviewed in April 2006, the Department determined the countable family income to be \$2,784.30 a

month from a combination of wages from employment and unearned income. It also determined that the petitioner herself was covered by her own health insurance.

- 3. In a decision dated April 17, 2006, the Department notified the petitioner of the following actions in her children's cases:
- a. Effective May 31, 2006, her older son would no longer be eligible for Dr. Dynasaur coverage because he would turn eighteen on May 2, 2006.
- b. Her younger child would remain eligible for Dr.
 Dynasaur coverage.
- c. Effective June 1, 2006, her older son would be eligible for the Healthy Vermonters program.
- d. Her older son would not be financially eligible for VHAP based on the family's income.
- e. Her older son would not be financially eligible for Medicaid until he met a six-month spenddown amount of \$3,861.06.
- 4. The petitioner does not dispute the Department's determination of the total amount of family income. She argues that her son is still in high school and is also on probation, and therefore must live at home with her. She feels it is unfair to attribute all or a part of her income

as available to him in determining his eligibility for medical coverage under the various programs.

ORDER

The Department's decisions are affirmed.

REASONS

Under the Department's regulations a child is eligible for the Dr. Dynasaur program only until the end of the month in which he turns eighteen. W.A.M. § 3001.82. For VHAP, adults and high school students under age twenty-one are categorically eligible. W.A.M. §§ 4001.1 & 4001.6. However, parents and all children under twenty-one who live together must be included in a "VHAP group" in determining the financial eligibility of any individual in that group.

W.A.M. § 4001.8.

Individuals with group income less than 150 percent of poverty are financially eligible for VHAP. W.A.M. § 4001.84. As of January 1, 2006, for a three-person household, 150 percent of poverty was \$2,082 a month. Procedures Manual § P-2420B.

Applying the above provisions to the undisputed facts in the petitioner's case (*supra*), there is no question that her older child ceased to be eligible for Dr. Dynasaur benefits

as of May 2006. Based on the combined family income of \$2,784.30, the petitioner's son was also ineligible for VHAP because the family's income exceeded the 150 percent-of-poverty threshold of \$2,082 for a household of three persons.

The petitioner's older child remains categorically eligible for Medicaid because he is under 21 years of age.

See W.A.M. § M321. However, in determining his income eligibility for that program the regulations require that his parent's income also be considered. Id. § M331. The most beneficial allowed method of determining his eligibility for Medicaid (which the Department did in this case) is to consider him as being one-third of a household of three, and to compare one-third of the countable household income (\$979.51) to one third of the income maximum for a household of three persons (\$336). This resulted in the petitioner's son being ineligible for Medicaid until he incurs medical expenses of \$3,861.06 in the six month period beginning June 1, 2006 (\$979.51 - \$336 X 6).

As noted above, the petitioner does not dispute the numerical bases of the Department's decisions. Inasmuch as the Department's decisions in the matter were based upon an accurate determination of the petitioner's family income and were in accord with the applicable regulations, the Board is

bound to affirm them. 3 V.S.A. § 3091(d), Fair Hearing Rule No. 17.

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